

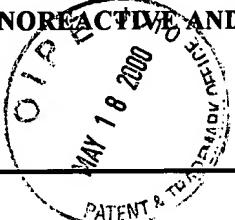
**TRANSMITTAL OF FORMAL DRAWINGS**

Docket No.

10308

In Re Application Of: **Leonard Harrison, et al.**

Serial No.	Filing Date	Batch No.	Examiner	Art Unit
08/663,272	11/25/96	I11	F. Vander Vegt	1644

Invention: **IMMUNOREACTIVE AND IMMUNOTHERAPEUTIC MOLECULES**

Address to:

**Assistant Commissioner for Patents**  
Washington, D.C. 20231

Transmitted herewith are:

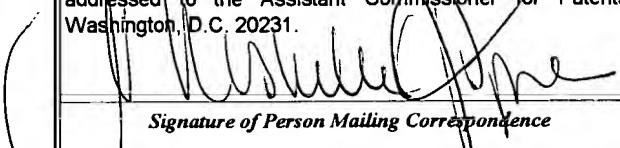
**Four (4) sheets of formal drawing(s) for this application.**

Each sheet of drawing indicates the identifying indicia suggested in 37 CFR Section 1.84(c) on the reverse side of the drawing.

  
\_\_\_\_\_  
*Signature*Dated: May 15, 2000

**Frank S. DiGilio**  
Reg. No.: 31,346  
**SCULLY, SCOTT, MURPHY & PRESSER**  
400 Garden City Plaza  
Garden City, New York 11530  
(516) 742-4343

I certify that this document and attached formal drawings are being deposited on May 15 2000 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

  
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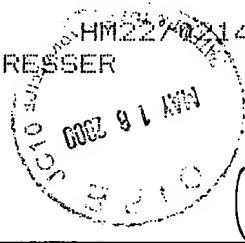
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APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/663,272	11/25/96	004	VANDER VEGT, F	1644 02/14/00
First Named Applicant	HARRISON,	35 USC 154 (b) term ext.	=	0 Days.

TITLE OF INVENTION IMMUNOREACTIVE AND IMMUNOTHERAPEUTIC MOLECULES

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1 10308	424-184.100	I 11	UTILITY	NO	\$1210.00	05/15/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Scully, Scott, Murphy &amp;

2 Presser

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE AMRAD Corporation Limited

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Victoria, Australia

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual  corporation or other private group entity  government

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

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